STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	H044101	A. BUILDING: _____ B. WING _____	01/28/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
F W HUSTON MEDICAL CENTER	408 DELAWARE ST WINCHESTER, KS 66097

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S 000	INITIAL COMMENTS The following citations represent the findings of a Health Licensure Resurvey	S 000		
S1395 SS=C	28-39-163 Administration (b) Policies and procedures. (1) Each licensee shall adopt and enforce written policies and procedures to ensure all of the following: (A) Each resident attains or maintains the highest practicable physical, mental, and psychosocial well-being. (B) Each resident is protected from abuse, neglect, and exploitation. (C) The rights of residents are proactively assured. (2) The facility shall revise all policies and procedures as necessary and shall review all policies and procedures at least annually. (3) Policies and procedures shall be available to staff at all times. Policies and procedures shall be available, on request, to any person during normal business hours. The facility shall post a notice of availability in a readily accessible place for residents. This REQUIREMENT is not met as evidenced by: K.A.R. 28-39-163 The facility reported a census of 6 residents. Based on observation, record review and	S1395		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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S1395	Continued From page 1 interview the facility failed to have facility policy and procedures available at all to staff and shall post a notice of availability in a readily accessible place for residents. - On 1/16/15 at 12:45 PM an observation of the assisted living facility the posting of the facilities policy and procedures was not found. On 1/16/15 at 1:12 PM staff A confirmed the policies and procedures were not posted and that the facility did not have a policy on posting the location of the facility policy and procedures. The facility failed to post a notice of availability of policy and procedures in a readily accessible place for residents.	S1395		
S3080 SS=D	26-41-201 (a) (b) Functional Capacity Screen on Admission a) On or before each individual ' s admission to an assisted living facility or residential health care facility, a licensed nurse, a licensed social worker, or the administrator or operator shall conduct a screening to determine the individual ' s functional capacity and shall record all findings on a screening form specified by the department. The administrator or operator may integrate the department ' s screening form into a form developed by the facility, which shall include each element and definition specified by the department. (b) A licensed nurse shall assess any resident whose functional capacity screening indicates the need for health care services. This REQUIREMENT is not met as evidenced	S3080		

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S3080	Continued From page 2 by: 26-41-201(a)(b) The facility identified a census of 6 residents. The sample included 3 residents. Based on observation, record review, and interview the facility failed to ensure a licensed nurse assessed and signed the functional capacity screen before or on admission for 1 (#103) of the sampled residents who required health care services. Findings included: - The Functional Capacity Screen (FCS) dated 12/23/14 for resident #103 revealed the level of care assessment for the resident which indicated the need for health care services, including monitoring for medical monitoring and medication management. The form lacked a signature from a licensed nurse. Observation on 1/26/15 at 3:30 P.M. revealed the resident returned to the facility from an appointment and ambulated through the facility. Interview on 1/26/15 at 2:43 P.M. with administrative staff A revealed he/she acknowledged the FCS lacked a signature from a licensed nurse. The undated policy provided by the facility regarding qualifying a resident for assisted living failed to address the need for a licensed nurse ' s signature on the FCS if the resident required health care services. The facility failed to ensure the resident was assessed by a licensed nurse and that licensed nurse signed the FCS.	S3080		

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S3090 SS=D	26-41-202 (c) Admission Negotiated Service Agreement (c) Each administrator or operator shall ensure the development of an initial negotiated service agreement at admission. This REQUIREMENT is not met as evidenced by: K.A.R 26-41-202 (c) The facility reported 6 residents with three residents sampled. Based on observation, interview and record review the facility failed to develop an initial Negotiated Service Agreement (NSA) at admission. (#101) Findings included: - Review of the clinical record for resident #101 revealed the resident was admitted on 3/3/14. The Negotiated Service Agreement (NSA) dated 3/5/14 revealed the resident required staff to manage his/her meals, medications, and required dressing assistance and to monitor his/her overall wellness. Observation on 1/26/15 at 12:35 P.M. revealed the resident sat in a chair in her room. Interview on 1/26/15 at 2:43 P.M administrative staff A acknowledged the NSA was not developed until after admission. The undated Negotiated Service Agreement policy provided by the facility revealed the NSA	S3090		

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S3090	Continued From page 4 will be completed by the manager prior to or upon admission of the resident. The facility failed to develop and Negotiated Service Agreement at admission for resident #101.	S3090		
S3101 SS=D	26-41-202 (h) NSA Signatures (h) Each individual involved in the development of the negotiated service agreement shall sign the agreement. The administrator or operator shall ensure that a copy of the initial agreement and any subsequent revisions are provided to the resident or the resident's legal representative. This REQUIREMENT is not met as evidenced by: K.A.R 26-41-202 (h) The facility identified a census of 6 residents with 3 chosen for sample. Based on observation, record review and interview the facility failed to ensure the development of a written Negotiated Service Agreement (NSA) signed by a nurse when health services were required for 1 (#101) of the sampled residents and lack of signature of each individual involved in the development of the NSA for 1 (#103) of the sampled residents. Findings included: - Review of the clinical record for resident #1 on 1/26/15 at 1:00 PM revealed the resident was admitted on 3/3/14. The Negotiated Service Agreement (NSA) dated	S3101		

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S3101	Continued From page 5 3/3/14 revealed the resident required staff to manage his/her meals, medications, and required dressing assistance and to monitor his/her overall wellness. The NSA included signatures of the resident, the administrator and a licensed social worker but lacked evidence of collaboration with a licensed nurse. Observation on 1/26/15 at 12:35 P.M. revealed the resident sat in a chair in her room. Interview on 1/26/15 at 2:43 P.M administrative staff A acknowledged the NSA was not signed by a licensed nurse. The undated Negotiated Service Agreement policy provided by the facility revealed that all persons need to sign the form and a copy would be given to the resident/responsible party and one placed in the residents chart. The facility failed to include a licensed nurse in the development of the NSA for this resident who required health services. - Review of the clinical record for resident #103 on 1/26/15 at 1:00 P.M. revealed an admission date of 12/28/14. The Negotiated Service Agreement (NSA) dated 12/28/14 revealed the resident required assistance with meals, medication management and assistance with activities of daily living as needed. The NSA included the signature of a licensed social worker but lacked the signature of the resident or responsible party or the collaboration of a licensed nurse. Observation on 1/26/15 at 3:30 P.M. revealed the resident returned from an appointment and	S3101		

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S3101	Continued From page 6 ambulated through the facility. Interview on 1/26/15 at 2:43 P.M administrative staff A acknowledged the NSA was not signed by a licensed nurse. The undated Negotiated Service Agreement policy provided by the facility revealed that all persons need to sign the form and a copy would be given to the resident/responsible party and one placed in the residents chart. The facility failed to include a licensed nurse in the development of the NSA for this resident who required health services.	S3101		
S3420 SS=E	28-39-256 MECHANICAL REQUIREMENTS (c) Mechanical requirements. (1) Heating, air conditioning, and ventilating systems. (A) The system shall be designed to maintain a year-round indoor temperature range of 70oF or 21oC to 85oF or 26oC. (B) Each apartment or individual living unit shall allow the resident to control the temperature. (2) Plumbing and piping systems. (A) Backflow prevention devices or vacuum breakers shall be installed on fixtures to which hoses or tubing can be attached. (B) Water distribution systems shall be arranged to provide hot water at outlets at all	S3420		

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S3420	Continued From page 7 times. The temperature of hot water shall range between 98oF and 120oF at bathing facilities, sinks, and lavatories in resident use areas. (3) Electrical requirements. (A) All spaces occupied by persons or machinery and equipment within the buildings, approaches to buildings, and parking lots shall have adequate lighting. (B) Minimum lighting intensity levels shall be as required in Table 1. (C) Each corridor and stairway shall remain lighted at all times. (D) Each light in resident use areas shall be equipped with shades, globes, grids, or glass panels. This REQUIREMENT is not met as evidenced by: K.A.R. 28-39-256(c) (2) (B) The facility identified a census of 6 residents. The facility failed to maintain a water distribution system arranged to provide hot water ranging from 98 degrees Fahrenheit through 120 degrees Fahrenheit in resident areas. Findings included: - Observation on 1/20/15 at 8:53 AM. revealed the public restroom sink water 124.8 degrees Fahrenheit. Observation on 1/20/15 at 8:55 A.M. Revealed the laundry room sink water was 123.8 degrees	S3420		

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S3420	Continued From page 8 Fahrenheit. Observation on 1/20/15 at 9:00 A.M revealed the sitting room123.4 degrees Fahrenheit. Observation on 1/21/15 at 10:32 A.M. with maintenance staff B revealed the laundry room temp was 121.7 degrees Fahrenheit and the public restroom sink was 122 degrees Fahrenheit. Interview on 1/21/15 at 10:35 P.M. with maintenance staff B revealed he/she acknowledged the above mentioned areas had temperatures above 120 degrees Fahrenheit. He/she also acknowledged the water temperatures in residential areas should be below 120 degrees Fahrenheit. Although requested the facility failed to provide a policy on hot water temperatures. The facility failed to maintain appropriate water temperatures in residential areas.	S3420		